

2024 TROPICAL 7s

PLAYER CONSENT & MEDICAL RELEASE WAIVER

In consideration of being allowed to participate in any way in the 2024 Tropical 7s and related events and activities (subsequently referred here as “2024 Tropical 7s”), the undersigned acknowledges, appreciates, and agrees that:

1. The risks of injury and illness from the activities involved in the 2024 Tropical 7s are significant, including the potential for permanent paralysis and death. Participation also includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and I willingly agree to comply with the stated and customary terms and conditions for participation including any protection against infectious diseases. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Tropical Rugby their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (“RELEASEES”), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I confirm that to the best of my knowledge that I / my son / daughter does not suffer from any medical conditions that would prevent me / him / her taking part in the 2024 Tropical 7s and related activities safely and confirm that the player satisfies both the Event's and their Home Rugby Union's eligibility criteria including the completion of any required waivers/release forms where applicable.
5. I hereby grant permission to the Event's appointed trainer, physician or other hospital or emergency personnel to attend to the participant. I also allow for any emergency, medical and/or first aid to be administered to me / my son / my daughter, including authorizing any medical treatment facility/hospital to administer emergency treatment, for any illness/injury/accident resulting from rugby activities or otherwise while participating in the event or related activities.
6. I hereby authorize the diagnosis, treatment and/or hospital care of the participant in the event of an accident, injury, sickness, etc. and assume the responsibility for payment of any such treatment. In the event of serious injury, I expect that reasonable effort will be made to contact the parent/guardian/emergency contact of the participant in order to receive authorization before any medical treatment is undertaken. However, I agree to this treatment being authorized by a member of the event organization, who may sign any written form of consent required by hospital authorities should a surgical operation and/or medication be deemed necessary and providing that the delay to obtain my authorization might be considered by a doctor likely to endanger my / my son's / my daughter's health and safety.
7. I hereby confirm that I / my son / my daughter has obtained appropriate insurance(s) that provides appropriate coverage for injury and/or illness for all the activities they are partaking in, including suitable cover where legal, medical, and repatriation costs may be required.
8. In consideration of participation in the Tropical 7s, the undersigned agrees that their likeness, or the likeness of their child/ward may be photographed or videotaped and that such image may be published in an outlet used to promote Tropical 7s or their partners.
9. Tropical 7s may use information submitted as part of team registration to communicate with you about your team entry, to ask you for feedback on the event and/or to contact you about future Tropical 7s events, promotions, competitions or special offers that may be of interest to you. Tropical 7s may disclose your personal contact information to carefully selected service providers, official suppliers and tournament partners.

PLAYER DECLARATION (COMPLETE IF THE PLAYER IS OVER 18 AT THE TIME OF SUBMISSION)

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Name of Player:

Signature of Player:

Date signed:

PARENT/LEGAL GUARDIAN DECLARATION (COMPLETE IF THE PLAYER IS UNDER 18 AT THE TIME OF SUBMISSION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of Player:

Name of parent/guardian:

Parent guardian/signature:

Date signed: